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CONFIRMATION NO. 3677

<b>SERIAL NUMBER</b> 10/531,598	<b>FILING OR 371(c) DATE</b> 11/25/2005 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1615	<b>ATTORNEY DOCKET NO.</b> 3029-1002	
<b>APPLICANTS</b> Anders Pettersson, Lilla Edet, SWEDEN; Christer Nystrom, Uppsala, SWEDEN; Yvonne Hakansson, Uppsala, SWEDEN;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/SE03/01598 10/15/2003					
<b>** FOREIGN APPLICATIONS *****</b> SWEDEN 0203065-8 10/16/2002					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> SWEDEN	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 48	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 466					
<b>TITLE</b> Gastric acid secretion inhibiting composition					
<b>FILING FEE RECEIVED</b> 2430	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		